## 1999 NATIONAL HIV PREVENTION CONFERENCE

## Abstract 477

TITLE: Collaboration, Cooperation and Communication

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**ISSUE:** Inadequate nutrition, drug use, teen pregnancy, poverty and violence impact a child's ability to learn. Numerous publications posit that student health status and achievement are "inextricably intertwined" and that there is a direct link between student health risk behavior and education outcomes. Health, education and social service agencies are now recognizing that they must collaborate closely to meet the needs of the children they serve. We can no longer approach services independently or categorically.

**SETTING:** Arizona's teen drug use is higher than the national average. Arizona ranks fourth in the nation in ten pregnancy (Arizona Department of Health Services [ADHS], 1998) and has the eleventh highest rate of violent teen death in the nation. Over 18% of Arizonan's live at or below the poverty level (U.S. Census Bureau). As of October 1998, Arizona recorded over 5,800 cases of AIDS (ADHS, Office of STD/HIV/AIDS). The number of HIV-infected persons (adults and children) reported through the Arizona HIV Infection Surveillance Report was 4,285 as of October 1998.

PROJECT: It is important to build a state-level structure that supports the implementation of a coordinated approach to school health. The Arizona Department of Education (ADE) provides resources and assistance to schools in the implementation of a coordinated school health model. Tobacco prevention education, nutrition services, health education, HIV education and other school health services are operated from within the Student Services Division. This structure creates a shared vision among staff and a seamless approach to the administration of several programs. Outside agency collaboration is also critical in the implementation of a coordinated school health model. This project demonstrates how successful partnerships between the various disciplines in health and education are built. (1) A statewide strategic plan developed jointly by the ADE, ADHS, and the Governor's Office for Children provides a common direction and shared responsibility for statewide measurable goals related to drug, alcohol, tobacco and violence prevention. (Health Services & Environment) (2) Comprehensive Health Education and Physical Activity Standards adopted by the Arizona State Board of Education brings together a task force of health and education professionals to develop performance objectives to assist schools in the implementation of the standards (Health and Physical Education) (3) The Arizona School Health Association currently focuses on school-based health centers and improving access to comprehensive health care services for children. Members include school nurses, physicians and ADE and ADIIS staff. (Health Services) (4) Team Nutrition Grants create opportunities for schools to implement nutrition education through a network of teachers, principals, nurses and parents. (Nutrition Services) (5) Federal Emergency Management Association has partnered with the ADE to provide multi hazard safety training to schools. (School Environment) (6) Adolescent school health professionals and school nurses work closely with ADE to collect data and communicate information to parents of school children. The two groups focus on providing training and technical assistance to school professionals who foster physical and mental health for students, parents and school staff. ADE, ADHS and the local Community Planning Group (CPG) work together on issues related to HIV/AIDS and education/prevention services for youth both in the school and within the community (School/Community Involvement).

**RESULTS:** The development of a statewide scorecard is used to assess the needs of communities and resources are combined to develop a statewide evaluation plan. Agencies coordinate conferences to avoid duplication. For example, the annual Governor's Alliance Against Drugs conference provided collaboration opportunities for school and behavioral health prevention coordinators. More cost-effective programs are sustained through a mutual working agency partnership.

**LESSONS LEARNED:** Without formal infrastructure funding, an effective, coordinated school health program is achieved through collaboration, cooperation and communication at federal, state and local levels. The establishment of partnerships at all levels fosters effectiveness.

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